PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I

Application or	Docket	Number
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OTHER THAN

8301CF-P

SMALL ENTITY

	(Cc		(Column 1	olumn 1) (((Column 2)		TYPE		OR	R SMALL ENTITY	
TOTAL CLAIMS		13					RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS (8 r			18 minu	s 20=	20= * G			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			us 3 =	• /			X40=		OR	X80=	& C	
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=		
* If the difference in column 1 is less than zero, ent			o, ente	r "0" in co	olumn 2		TOTAL		OR	TOTAL	790	
CLAIMS AS AMENDED - PART II								TOTAL		10	OTHER	
(Column 1)			WILITOED	(Column 2) (Column 3))	SMALL E	ENTITY	OR	SMALL	
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	IT CLAIM		j	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Coli	umn 2)	(Column 3	.)	ADDIT. FEE	<u> </u>	4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER		HIG NUI PREV	HEST MBER YIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL FEE
	Total	AMENDMENT	Minus	PAII	D FOR	=	1	X\$ 9=	FEE	1	X\$18=	
ENC	Independent		Minus	***		- -	-			OR		
A	•				IT CLAIM	 	-	X40=		OR	X80=	<u> </u>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEL	
		(Column 1)		(Col	umn 2)	(Column 3	3)_					
ENTC		CLAIMS REMA!NING AFTER AMENDMENT		NU PRE	SHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	•	Minus	***		<u> -</u>	_	X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ل	+135=		1		1
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTA	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
•	The "Highest Nur	mber Previously F	Paid For" (Total o	r Indepe	ndent) is th	e highest num	nber f	ound in the ap	ppropriate b	ox in c	olumn 1.	